

Please print or type. (Form designed for use on elite (12-pitch) typewriter.)

UNIFORM HAZARDOUS WASTE MANIFEST		Generator's US EPA ID No.	Manifest Document No.	2. Page 1 of	Information in the shaded areas is not required by Federal law.
3. Generator's Name and Mailing Address		DOUGLAS AIRCRAFT CO. 190th & Normandie Ave. Torrance, CA 90502		A. State Manifest Document Number 84331382	
4. Generator's Phone (213-533-6677		6. US EPA ID Number		B. State Generator's ID	
5. Transporter 1 Company Name		J. C. Liquid Waste Disposal		C. State Transporter's ID 57671	
7. Transporter 2 Company Name		8. US EPA ID Number		D. Transporter's Phone 213-268-3137	
9. Designated Facility Name and Site Address		10. US EPA ID Number		E. State Transporter's ID	
CASMALIA P.O. Box E. NTU Road Casmalia, CA 93429		I. C. A. D. 0.2.0.7.4.8.1.2.5		F. Transporter's Phone	
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)		12. Containers		13. Total Quantity	14. Unit Wt/Vol
a. Waste Acid Liquid NOS Corrosive NA 1760		No.	Type		
		001	TT	04500	G
b.					
c.					
d.					
J. Additional Descriptions for Materials Listed Above		K. Handling Codes for Wastes Listed Above			
Nitric Acid 9.3% Chromic Acid 5.5% Hydrofluoric 1.0% Water 84.2%		08/E			
15. Special Handling Instructions and Additional Information					
Guid - No 60 PERMIT 36468 Use gloves, goggles, respirator - May cause severe burns to skin and eyes					
16. GENERATOR'S CERTIFICATION: I hereby declare that the contents of this consignment are fully and accurately described above by proper shipping name and are classified, packed, marked, and labeled, and are in all respects in proper condition for transport by highway according to applicable international and national governmental regulations.					
Printed/Typed Name		Signature		Date	
Donald C. gerber		sb		Month Day Year 04/15/85	
17. Transporter 1 Acknowledgement of Receipt of Materials		Signature		Date	
Printed/Typed Name		Signature		Month Day Year	
TOMY CAIRO		Tomy Cairo w/p 52154		04/15/85	
18. Transporter 2 Acknowledgement or Receipt of Materials		Signature		Date	
Printed/Typed Name		Signature		Month Day Year	
Milo Canas		Milo Canas		04/15/85	
19. Discrepancy Indication Space					
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in Item 19.					
Printed/Typed Name		Signature		Date	
CASMALIA RESOURCES-Eden Bautista		Eden Bautista		Month Day Year 04/15/85	

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3. Generator's Name and Mailing Address DOUGLAS AIRCRAFT CO. 190th & Normandie Ave. Torrance, CA 90502			A. State Manifest Document Number 84351382			
4. Generator's Phone (213-533-6677)			B. State Generator's ID			
5. Transporter 1 Company Name J. C. Liquid Waste Disposal			C. State Transporter's ID 35171			
6. US EPA ID Number C A D 0 5 8 0 1 8 3 6 7			D. Transporter's Phone			
7. Transporter 2 Company Name			E. State Transporter's ID 213-268-3137			
8. US EPA ID Number			F. Transporter's Phone			
9. Designated Facility Name and Site Address CASMALIA P.O. Box E. NTU Road Casmalia, CA 93429			G. State Facility's ID			
10. US EPA ID Number C A D 0 2 0 7 4 8 1 2 5			H. Facility's Phone			
11. US DOT Description (Including Proper Shipping Name, Hazard Class, and ID Number)			12. Containers	13. Total Quantity	14. Unit Wt/Vol	I. Waste No.
a. Waste Acid Liquid NOS Corrosive NA 1760			No. 001	Type TT	04500	G 111
b.						
c.						
d.						
J. Additional Descriptions for Materials Listed Above Nitric Acid 9.3% Chromic Acid 5.5% Hydrofluoric 1.0% Water 84.2%			K. Handling Codes for Wastes Listed Above			
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Printed/Typed Name Donald C. gerber			Signature sb		Date Month Day Year 04/15/85	
17. Transporter 1 Acknowledgement of Receipt of Materials			Signature		Date	
Printed/Typed Name Tony Chiao			Signature		Month Day Year 04/15/85	
18. Transporter 2 Acknowledgement or Receipt of Materials			Signature		Date	
Printed/Typed Name			Signature		Month Day Year	
19. Discrepancy Indication Space						
20. Facility Owner or Operator: Certification of receipt of hazardous materials covered by this manifest except as noted in item 19.						
Printed/Typed Name			Signature		Date Month Day Year	

SCANNED